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PTO/SB/01 (10-00)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	FITZ 3-1-1-1
	First Named Inventor	JOHN L. FITZ
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	08-17-2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD OF COATING OPTICAL DEVICE FACETS WITH DIELECTRIC LAYER
AND DEVICE MADE THEREFROM**

(Title of the Invention)

the specification of which

☒ is attached hereto OR as United States Application Number or PCT International

☐ was filed on (MM/DD/YYYY) (if applicable).

Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label 		OR <input checked="" type="checkbox"/> Correspondence address below	
Name <u>ATTN: PATENT COUNSEL, OGC</u>			
Address <u>NATIONAL SECURITY AGENCY</u>			
Address <u>9800 SAVAGE ROAD STE 6542</u>			
City <u>FT MEADE</u>	State <u>MD</u>	ZIP <u>20755-6542</u>	
Country <u>USA</u>	Telephone <u>301-688-0287</u>	Fax <u>301-688-0076</u>	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <u>John L.</u>		Family Name or Surname <u>Fitz</u>	
Inventor's Signature <u>John L. Fitz</u>		Date <u>15 August 2001</u>	
Residence: City <u>Baltimore</u>	State <u>MD</u>	Country <u>USA</u>	Citizenship <u>USA</u>
Mailing Address <u>8716 Wrights Mill Road</u>			
Mailing Address			
City <u>Baltimore</u>	State <u>MD</u>	ZIP <u>21244</u>	Country <u>USA</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <u>DANIEL Stephen</u>		Family Name or Surname <u>Hinkel</u>	
Inventor's Signature <u>Daniel S. Hinkel</u>		Date <u>15 August 2001</u>	
Residence: City <u>Laurel</u>	State <u>MD</u>	Country <u>USA</u>	Citizenship <u>USA</u>
Mailing Address <u>254 Ironshire South</u>			
Mailing Address			
City <u>Laurel</u>	State <u>MD</u>	ZIP <u>20724</u>	Country <u>USA</u>
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
SCOTT C.		HORST	
Inventor's Signature <i>[Signature]</i>		Date 8-15-01	
Residence: City SYKESVILLE	State MD	Country USA	Citizenship USA
Mailing Address 1005 SITKA SPRUCE LAKE			
Mailing Address			
City SYKESVILLE	State MD	ZIP 21784	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Harris		Turk	
Inventor's Signature <i>[Signature]</i>		Date 8/15/01	
Residence: City Baltimore	State MD	Country USA	Citizenship USA
Mailing Address 1214 William St.			
Mailing Address			
City Baltimore	State MD	ZIP 21230	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

First Named Inventor

Title

Group Art Unit

Examiner Name

Attorney Docket Number

08-17-2001

JOHN L. FITZ

METHOD OF COATING OPTICAL...

FITZ 3-1-1

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
ROBERT D. MORELLI	37,398
STEPHEN M. BLOOR	39,612

Place Customer
Number Bar Code
Label here

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

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Individual Name

Address

Address

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Fax

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Signature

Date

ROBERT D. MORELLI

Robert D. Morelli

08-17-2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: JOHN L. FITZ ; DANIEL S. HINXEL ; SCOTT C. HORST ; HANNA JONK
Application No./Patent No.: _____ Filed/Issue Date: 08-17-2001
Entitled: METHOD OF COATING OPTICAL DEVICE FACETS WITH DIELECTRIC LAYER
NATIONAL SECURITY AGENCY, a U.S. GOVERNMENT AGENCY
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

08-17-2001

Date

ROBERT D. MORELL

Typed or printed name

Robert D. Morell

Signature

PATENT COUNSEL

Title